

Comment Submission Form

Review of Agency Regulations Executive Order No. 36 Jack A. Markell, Governor

I. COMMENTER INFORMATION				
Last Name	First	M.I.	Date	
Name of Company (if applicable)				
Street Address		Apartment/Unit #		
City	State	ZIP		
Phone	E-mail Address			
II. REGULATION INFORMATION Which agency is responsible for the regulation you wish	Department of Health and Social	Denartme	ent of Natural Resources	
Which agency is responsible for the regulation you wish to change or eliminate?	Services (DHSS)		conmental Control (DNREC)	
	Department of Labor	Other		
	Office of Management and Budget (OMB)	☐ I don't k	now	
Which regulation would you like to see changed or eliminated? To assist us in identifying this regulation, please be as specific as possible. For example, you might say "The DNREC regulation that prohibits open burning without permission from the Department," or "Title 7, Section 1113 of the Delaware Administrative Code." (However, don't worry if you don't know the section of the Administrative Code.) There is no need to describe your experience with the regulation in your answer; that will be addressed in the next question.				
Please describe your personal experience with this regulation. Please be as specific as possible. Your answer may include information about how the regulation affects you or your organization, the cost of such regulation (monetary or otherwise), the amount of time required to fulfill the requirements of the regulation, your experience with the agency in connection with the regulation, or any other information you believe is pertinent. If you need additional space, feel free to use the next page.				
I believe the regulation I described above should be:	Streamlined or Elim	nated	☐ I don't know	
(Optional) If you believe the regulation should be streaml	ined or modified, in what ways would y	ou change it?	If you need additional	

III. ADDITIONAL COMMENTS	

Written submissions will be accepted through December 1, 2012.